Your Pregnancy Guide
Congratulations! You are going to have a baby! Having a baby is a special privilege. It is the beginning of the strongest of all bonds—the bond between a parent and child.

Both first-time moms and women who already have children will want to read this booklet. Learn how you can give your baby a healthy start in life by taking care of yourself while you are pregnant. See how your baby is growing each month. Find out tried and true tips to manage morning sickness from other moms-to-be like you. Read about needed tests and times you'll want to visit the doctor.

Some people read this booklet cover to cover. Others turn to the section they want to know more about. Glance at the What's Inside section to guide you to each topic.

Also, be sure to share this booklet with your friends and family as you enter an exciting new journey—the birth of your baby.

For more information on prenatal care, visit us at www.startsmartforyourbaby.com
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Your First OB Visit

“I made a doctor’s appointment the day after I did a home pregnancy test. At my first visit, my doctor did an ultrasound to make sure my baby was healthy. I found out my baby’s due date. I also started taking special vitamins right away to help my baby grow well.”

See your doctor as soon as you think you are pregnant. Studies show that getting prenatal care early can help you have a healthier baby. And you know you want to give your child the very best start at life!

At your first prenatal visit:

Your doctor will take your complete health history. Talk to your family and the baby’s dad before your visit. Ask them about any health problems that run in the family. Then, share what you learn with your doctor. Tell your doctor about any health problems you may have. List any medicines you take.

- Your doctor will do an exam.
- Your doctor will do a pelvic exam.
- You may get to hear the baby’s heartbeat.
- Your doctor may do an ultrasound.

Your doctor will get blood tests to:

- Check your blood type and blood counts.
- Find out whether your body is protected from some diseases like German measles.
- Check for any STDs and hepatitis.
- Check your urine for protein, sugar, or infection.

Blood tests are very important to help your doctor learn about your health. Every pregnant patient should get these tests.

Your doctor and your health team are here to help!

Make sure you ask all of the questions you would like to. Your doctor wants to know what is on your mind. Remember, no question is silly.
Q: How many times will I need to visit the doctor while I am pregnant?

A: In most cases, your prenatal visits will be:

- Every 4 weeks during the first 29 weeks you are pregnant
- Every 2 to 3 weeks after you are 30 weeks pregnant
- After 36 weeks, every 1 to 2 weeks until you go into labor

You should go to all of your prenatal visits, even if you are feeling well. Your health and the health of your baby depend on it.

Tanya’s Tip:
Keep everything in one place!

“Buy a notebook with pockets at the dollar store and decorate it up with all kinds of stickers. Write down any questions you have for your doctor or nurse between visits. Keep your appointment cards and prescriptions in a safe place until you need them.”

“My case manager is great. She helped get me into a group for moms who are having twins. It is nice to have someone take such an interest in me and my babies. Last month she found an agency that can help with my heating bills while I’m on bed rest. Having Ms. Barnes as my manager is like having someone in my corner who really cares.”

Most often a case manager is a nurse or a social worker who is assigned to certain members of a health plan. This person doesn’t prescribe medicine or give you hands-on health care. He or she can help you understand what is going on with your body during your pregnancy, offer emotional support, help you find resources, and work to keep your medical team informed about any health problems.
Your case manager:

- Can teach and prepare you to make healthcare decisions that are best for you and your baby
- Works with other members of your support team and helps everyone work toward the same goal
- Can answer your questions about medicines, treatment, or just general questions about being pregnant
- Helps find resources if you need assistance with personal or daily care needs
- Can offer you extra attention to help you have a healthy baby

If you would like to speak to a case manager, you can reach the case management department through member services at your health plan.

“I’m not really big into getting lab work done—guess you’d say I am kind of a baby when it comes to getting my blood drawn. But then the nurse explained that these tests can tell me if my baby is doing okay. Some tests also show if I am healthy. So, I make sure I get all the needed tests. Being pregnant is a very big responsibility and now I need to think of someone other than myself. Truly, more than anything—I want my baby to have a good start at life.”

You will need to get special types of tests at different times during your pregnancy. This is called prenatal testing. Some tests look at your health—others look at your baby’s health. If you get too far along, you may not be able to get the tests you need. Make sure to go to all of your visits so you don’t miss any tests.

**At Each Visit**

Your doctor will ask for a urine sample at each visit. You will pee into a cup so your doctor can check your urine. This sample will show your sugar and protein levels and tells if you have an infection.
Testing for Possible Birth Defects

When you go to the doctor early in your pregnancy, you can get the best tests available called first trimester screening tests. A blood test is done where a small amount of blood is taken from your arm with a needle. The blood is collected in tubes and sent to a lab. The screening also includes an ultrasound measurement of the skin thickness at the back of the baby’s neck. These tests can be done as early as your 3rd month. The tests are a way to check for the risk of birth defects before the baby is born. Ask your doctor about first trimester screening.

If you miss this early test, there is another test called the quad test. It is done between your 16th and 20th weeks. A small sample of your blood is drawn for the test. This test measures 4 proteins and hormones. The tests can often show if there is a chance the baby will have Down’s Syndrome, problems with the spine, kidneys, and intestines.

The first trimester or quad test cannot tell for certain that there is a birth defect. The tests can give you an idea of the chances of having certain birth defects. Your risk is based on some factors that include: your age, your weight, your race, and your health among other things.

The tests are not 100% correct all the time.

If your test comes back “normal” the chance of a birth defect is quite low. Still, the baby could have a birth defect that is not picked up by the blood test.

If your test results come back “abnormal” it does not always mean that a baby has a birth defect. In fact, most women who have abnormal results have healthy babies. At times the tests don’t show up as normal because of an incorrect due date (the tests use the age of your baby as a measurement.) If your test comes up as abnormal, your doctor may repeat the test or do other follow-up tests such as an ultrasound.

Talk to your doctor about any concerns you have with your test results.

About Amniocentesis

If the test for Down’s syndrome described above comes out “abnormal,” your doctor will most likely suggest a second test. This test is called amniocentesis, or amnio for short. For this test, the doctor will insert a long, very thin needle through your belly. Most women report it doesn’t hurt. Some women say they feel a quick tug or pinch. Next, the doctor will remove a small amount of water from the sac that surrounds the baby. The fluid is then tested to check the baby’s chromosomes.

Why else is an amnio done?

Sometimes doctors use this test to look for rare diseases or infections in the baby.

Sometimes this test can find out late in your pregnancy if the baby’s lungs are mature.

The test can tell if you are having a boy or a girl.
About Ultrasound

This test uses sound waves to look at the baby in your belly. It is common to have this test at about 18 to 20 weeks—or just about the middle of your pregnancy. The person doing the test will place a clear jelly on your belly. Then he or she will gently press an instrument over your tummy. The test does not hurt.

The ultrasound will look closely at everything that is going on in your womb.

The ultrasound will measure:
- The placenta. This is the tissue that connects you and your unborn baby in the womb. It brings food to the baby and takes waste out.
- The amount of fluid in the sac
- The baby’s size

The ultrasound will show:
- If you are carrying one or more babies
- How your baby’s heart, stomach, kidneys, and spinal cord look

Later in your pregnancy, the test can:
- Show your baby’s growth and position
- Check the fluid around the baby
- Make sure the baby is moving and healthy

Some possible health problems in the baby may be too small to see. An ultrasound can not diagnose Down’s syndrome.

About Vaginal Ultrasound

The technician places an instrument with clear jelly on it in your vagina.

At the early to middle part of your pregnancy, the test can:
- Measure how long your cervix is
- Tell the doctor about your chances of an early delivery
- Tell if you are at risk to miscarry
Blood Sugar (Diabetes) Testing

“My sister got high blood sugar when she was pregnant with her son. High sugar can cause health problems for babies. To lower my chance of getting diabetes when I was pregnant, I made sure I ate good foods. I kept active most days and I went to all of my visits. I didn’t want to harm my baby.”

Let your doctor know if you have high blood sugar or had diabetes when you were pregnant before. Your health team may have you take the blood sugar test earlier.

To lower your chances of getting diabetes when you are pregnant:
- Stay active.
- Eat a healthy diet.
- Gain the amount of weight your doctor suggests you gain.

About GBBS

Your doctor will swab the areas in your vagina at around weeks 34 to 36. This test is called the Group B Beta Strep test or GBBS for short. The test looks for bacteria (germs) that can hurt your baby’s health if you have a vaginal birth (the baby comes through your birth canal). If you have GBBS germs while you are pregnant, you will need antibiotics during labor. This medicine will keep your baby safe.

About Flu Shots

Pregnant women who will be in their 2nd or 3rd trimester during flu season should have a flu shot. Flu season runs from November to April each year. Flu shots are safe for your baby.

Getting the flu when you are pregnant can mean getting much sicker than other people. It is also so important to get the flu vaccine if you have other health problems. Ask your doctor about a flu shot (not the mist you take through your nose).
Carrying a new life within you can be a powerful experience! You may hear your doctor mention terms about your body. Reading this section will help you find out about the body parts that allow you to have a baby. Learn what is going on in your body now and when you deliver.

Your **cervix** is the lowest part of your womb. It opens, or dilates, during labor. This happens so your baby can leave your womb and move down your birth canal.

Your **fallopian tubes**, or tubes, are two thin tubes that run from each side of your womb to each ovary. The sperm and the egg meet here to begin pregnancy.

Your **ovaries** are two very small almond-shaped glands, or organs. Your eggs are stored and released here. You have one ovary on each side of your womb.

Your **uterus** is often called your womb. It is a hollow, pear-shaped muscular organ in your lower belly. It sheds its lining organ each month during your period. Your baby will grow and develop here. Your uterus will tighten and relax over and over again during labor until your baby is born.

Your **vagina** is where your partner enters when you have sex. It is the tube, or birth canal, leading from your womb to the outside of your body.
How New Life Begins

To get pregnant, one of your eggs must join one of your partner’s sperm and become fertilized. The joining of the egg and sperm is called fertilization, or conception.

This is how it works:

- Each month, one of your ovaries releases an egg, and it travels down one of your fallopian tubes.
- After sex, your partner’s sperm move up through your vagina and womb and into the tube.
- If one of the sperm joins your egg in the tube, it becomes fertilized.
- The fertilized egg begins to divide as it travels back down the tube to your womb.

A Peek Inside Your Body

This is what you’d see if you took a peek inside your pregnant body. There are some amazing things going on inside of you!

- Inside your uterus, your baby is floating in a fluid-filled sac called the amniotic sac.
- The placenta is a pancake-shaped area that allows your baby to get food and oxygen.
- The umbilical cord connects your baby to the placenta. This rope-like cord carries oxygen and nutrients to your baby. It also takes waste products away from your baby.
Watching Your Baby Grow Each Month

You may wonder about how your baby is growing and changing. Pull out this booklet often to read about how your baby is developing.

First Trimester—Months 1 to 3

Month 1
- The egg and sperm meet.
- This very tiny fertilized egg divides many times, forming a ball of cells.
- These cells then form layers of cells that become your baby's body.
- At the end of the first month, your baby is about the size of a pea.

Month 2
- At five weeks, your baby's brain and spinal cord (central nervous system) and all the other body systems begin to develop. The heart begins to beat.
- Your baby's face, ears, eyes, and mouth are forming.
- By the end of the second month, your baby is about an inch long and weighs less than an ounce.

Month 3
- Your baby's bones begin to harden.
- Your baby moves quite a bit, but you won't be able to feel it yet.

By the end of the third month:
- The ears and sex organs have formed.
- Your baby can swallow.
- Your baby can move his or her eyes.
- Your baby is about the size of a walnut.

Second Trimester—Months 4 to 6

Month 4
By the end of the fourth month:
- Your baby is completely formed.
- Your baby can hear your voice and other sounds that are around you. Try singing to your baby!
- Your baby is about six inches long. He or she is about the size of the palm of your hand. Imagine that!

Month 5
- Your baby's muscles have become stronger. He or she starts to move around and kick a lot.
- Your baby's eyebrows, eyelashes, and teeth are beginning to form.
- By the end of the fifth month, your baby weighs about one pound and is about ten inches long.
Month 6

- Your baby’s brain is growing fast.
- Real hair and toenails are forming.

By the end of the sixth month:

- Your baby is about 10 inches long and weighs just under 2 pounds.
- Your baby is almost completely formed. But his or her lungs are not fully working. If born at this stage, your baby would require very special medical care to survive outside your womb.

Third Trimester—Months 7 to 9

Month 7

- Your baby’s eyes begin to open and shut.
- Body fat and weight increase.
- Your baby may be moving much more now.

By the end of the seventh month:

- Your baby is about 11 inches long and weighs about 3½ pounds.
- All of the bones have developed, but they are still soft.
- All of your baby’s senses are fully formed.

Month 8

- Your baby is growing and preparing for life outside your womb.
- Your baby sleeps most of the time, but is very active when awake.
- By the end of the eighth month, your baby is about 13 inches long and weighs about 5 to 6 pounds.

Month 9

- Your baby is getting more active. You may feel little feet or hands pushing against your belly.
- Your baby continues to prepare for birth.
- By the end of the ninth month, your baby is about 19 to 21 inches long and weighs about 7 to 8 pounds.
How Your Body Changes

First Trimester

Your body will go through many changes during the first three months you are pregnant. Check off any things you have noticed.

How I am feeling:
- I feel more tired.
- I feel moody.

Changes in my body:
- My breasts are sore and fuller.
- My belly is slightly bigger.
- I’m sometimes sick to my stomach and may vomit. (This is also known as morning sickness.)
- I’m going to the bathroom more often.
- I’m slowly starting to gain weight.

You also may:
- Have backaches
- Feel dizzy
- Have heartburn
- Have a hard time having a bowel movement

Second Trimester

Many moms-to-be say that they feel their best during the second trimester. Your body is now more used to being pregnant. Still, you will have many changes.

Check off any things you have noticed.

How I am feeling:
- My morning sickness has gone away or has gotten much better.
- I have more energy.
- I sometimes feel winded or short of breath. (Your lungs may feel crowded by your growing womb.)
- I have more heartburn and trouble with bowel movements.

Changes in my body:
- I’m gaining weight more quickly. (You may gain about 4 pounds each month. This weight gain is normal and good for your growing baby!)
- My belly is getting bigger, and my hips are getting wider.
- I can feel my baby moving at around 16 to 20 weeks. (This is often described as a fluttering feeling.)
- My breasts are growing larger as the milk glands inside them grow.
- My skin is changing colors due to more blood flow. (You may notice the skin around your nipples or face is darker. You may also see a line that runs from your belly button to your pubic bone.)
- I sometimes have muscle squeezes (contractions) in my lower belly that don’t hurt.
- I feel my baby having hiccups. (This often happens toward the end of this trimester.)
You also may:
- Feel dizzy
- Have bad dreams
- Get leg cramps
- Have a stuffy nose or nosebleeds
- Snore

Third Trimester

You are now in the “home stretch” of pregnancy, and your body is getting ready to give birth!

Check off any things you have noticed.

How I am feeling:
- I’m getting excited!
- I’m getting nervous!
- I wish my delivery day would finally come!

Changes in my body:
- I have more heartburn.
- I have more trouble having a bowel movement.
- My belly and breasts are getting much bigger.
- I have more trouble walking and getting up from a couch or chair.
- I find it harder to sleep.
- I feel my womb squeezing (have contractions) now and again.
- Sometimes I am short of breath.

You also may have:
- Pelvic and hip pain
- Piles (hemorrhoids)
Keeping Your Growing Baby Safe

As your precious baby grows inside your body, you will want to steer clear of anything that could harm your baby.

Did you know?

Drinking alcohol or taking street drugs can cause your baby to be born very sick or too small. They can even cause birth defects.

Booze is bad news.
Do not drink any wine, beer, booze, or spirits when you are pregnant. Drinking alcohol can cause babies to have serious mental and physical defects for their whole life.

Street drugs are deadly.

Using drugs can cause you health problems while you are pregnant. And your baby can become addicted to the drug you take. That can mean your baby has to go through withdrawal after birth.

Even a little bit of a drug can be harmful. Cocaine use can cause the placenta to separate from your womb. This is called abruption. It is very painful and very dangerous. And it can lead to the death of you or your baby.

Some medicines can harm your baby.

To keep your baby safe, talk to your doctor before taking any:

- Over-the-counter drugs
- Prescription drugs
- Herbal medicines
- Medicines meant for others
- Medicines with hormones

Quit Smoking—Good for Your Baby!

“It was very hard to give up smoking when I was pregnant. My baby’s dad and all my friends still smoked. My nurse told me that smoking could raise the risk of my baby being born too soon and too small. So I quit! She said that even being around smoking could cause these problems.

At first, my friends made a fuss when I walked out of the room when they lit up. Then they knew I meant business. I wasn’t going to put my baby at risk—no way, no how!”

Giving up cigarettes is one of the best things you can do for your baby. Smoking can cause very serious health problems for your unborn child. But did you know that being around someone who smokes (second-hand smoke) while you are pregnant can also cause harm to your baby? Make sure no one smokes around you or in your home.
Smoking or being near second-hand smoke while you are pregnant can:

- Slow down your baby's growth and development
- Lower the amount of oxygen your baby gets
- Raise the risk that your baby will be born too soon
- Cause your baby to fuss and cry more
- Make it harder for your child to do well in school
- Cause your child to have more ear infections and colds

Smoking cigarettes while you are pregnant can hurt your baby's lungs and airways. This damage can lead to breathing problems and asthma. It can also increase the risk of Sudden Infant Death Syndrome, or SIDS. This is the unexplained sudden death of a healthy infant. It is also known as crib death.

**Quit Smoking—Good for You!**

If you give up cigarettes, you will feel healthier too. You will quickly see that you:

- Have more energy
- Breathe easier
- Enjoy the taste and smell of food more
- Make more breast milk
- Have fewer wrinkles and cleaner teeth
- Have more money to spend on you and your baby

**Help With Quitting**

Quitting smoking is not easy, but once you quit, you and your baby will feel better. It’s the greatest gift you can give your baby.

If you want to stop smoking for your baby’s health and your health, take that first big step and ask your doctor for help. Your health plan may be able to give you some tips as well.

For free help, go to smokefree.gov, or call 1-800-QUIT-NOW.

**Protect Your Baby from Other Dangers**

“You hear so much that this is bad for you or something else is bad for the baby. And it can make you kind of worried all the time. I think the best thing to do is to learn what to stay away from. Then do it. I feel that giving up something for a little while can make a big difference in my baby’s health. Why risk it?”

Smoking, alcohol, and cigarettes are not the only risks for your growing baby. There are many other dangers you should watch out for. Take a couple of minutes to read through the list on page 16 for ways to protect your baby.
Be smart about what you do:

- Stay out of hot tubs, steam rooms, and saunas. The heat from these can damage your baby’s brain and spinal cord.
- Don’t do hard physical work. Avoid heavy lifting, pushing or pulling heavy loads, climbing stairs, and standing for long periods of time. These activities can raise the risk of:
  - Preterm labor
  - Swelling in your legs
  - Causing pain in your lower back, hand, or wrist
  - Falling down and getting hurt

Be smart about what you touch:

- Have cats or around cats? Wash your hands well after touching a cat. Don’t change cat litter boxes unless you wear gloves. Also, wear gloves if you work outside with dirt or sand where stray cats may be likely to poop. Why? Touching cat poop when you are pregnant can cause a serious infection called toxoplasmosis.
  
  You can also get this infection from touching raw meat. So, be sure to also wash your hands well with soap and water after you touch meat. Toxoplasmosis raises your chances of having a miscarriage. It can also cause you to have a stillborn baby or a baby with birth defects.
- Don’t touch lizards, snakes, and turtles. These reptiles can spread a germ called salmonella. This can make you very sick and can cause bad health problems for your baby. If you touch these reptiles, be sure to wash your hands in warm, soapy water before touching food or anyone else.

Be smart about work:

- Working long hours or standing on your feet for a long time can put a lot of stress on the pregnancy. It is not unusual to limit work activity at some point in most pregnancies.
- If your doctor tells you that you are at higher risk for a preterm delivery you may need to stop working for a few weeks or more.
- Once you have told your employer that you are pregnant try and talk to them about their expectations and yours.

Be smart about what goes into your body:

- Avoid breathing carbon monoxide gas. Make sure any gas or charcoal-burning stoves are in a well-vented space. Make sure your gas stove or wood burning stove vents to the outside. Don’t run a car inside the garage even if the door is open.
• Talk to your doctor before taking any herbal medicines. The effects of these drugs on a pregnant woman are still not known.
• Only get needed X-rays. X-rays can slow your baby’s growth and cause other problems. You can have some X-rays, but your doctor needs to know if you do. X-rays are not the same as ultrasound. Studies show ultrasound is safe for pregnant women.
• Avoid caffeine in cola soft drinks, coffee, tea, and energy drinks. Drinking them can lead to miscarriage. And they can cause your baby to be too small at birth.
• Avoid working or being around harmful chemicals. They can cause miscarriage or cause your baby to be born too soon (preterm birth). They can also cause birth defects or learning problems later in life.

Harmful chemicals include:
• Bug sprays — especially those that contain a chemical called DEET
• The fumes from paint, cleaning fluid, and workplace chemicals
• Lead, which may be found in older paint

Do you use chemicals or X-rays at your job? Let your employer know you are pregnant. Ask for a different task until you have your baby. If you work with chemicals make sure you talk to your employer. Ask for materials about the chemicals you work with to show to your doctor.

New studies show that very high stress raises the chance that your baby will be born too soon or too small. Other studies show that pregnant moms who are stressed and worried have a greater chance of having a baby with asthma and allergies. Stress lowers both your immune system and your baby’s. Stress is not good for anyone.

How Can You Relieve Stress?
Here are some ways to beat stress:
• Stay active and eat right. See pages 18 and 19 for tips.
• Do something you enjoy every day. Watch a movie, go for a walk, chat with a friend – whatever you like!
• If you feel yourself getting stressed, do something that relaxes you. Take some slow breaths, stretch, or put your feet up and close your eyes.
• Too much tension in your house? Talk to someone you trust. Try to stay with a friend or relative if the tension gets too much.
• Worried about the pregnancy itself? Go to all your doctor visits. This way you can ask questions and get the answers you need.
• If you are in an abusive relationship, talk to your doctor. Call this free hotline at 1-800-799-7233. This is the National Domestic Violence Hotline.

There is hope. There is help! Talk to your doctor or a trusted friend today.
Staying Physically Active

Staying active while you are pregnant can make your labor and delivery easier. And it can help you maintain a healthy weight.

The best news? Regular exercise while you are pregnant is very good for your health and your baby’s health.

Remember, always talk to your doctor before starting an exercise program.

Check off what you’d like to try to stay active:

- Walk around the neighborhood or in an inside mall with your friends and family. Ask your health plan about a new, free program called Smart Steps for Your Baby®.
- Find a TV show that has exercises for pregnant women or “low-impact” exercises. OR walk in place while you watch your favorite TV show.
- Get a DVD or videotape at your local library to do at home. Ask for tapes on stretches, yoga, and low-impact exercises for pregnant women.
- Go swimming. Call your local YMCA or Department of Parks and Recreation to see if there is a program near you.

Try These Exercise Tips

The do’s of exercise:

- Talk with your doctor before starting any exercise program. If you exercised before you got pregnant, you should be able to keep it up while you are pregnant. As you get further along, you may need to slow down.
- Try to exercise at least 2 to 3 times each week for 20 to 30 minutes each time.
- Drink plenty of water before, during, and after you exercise.

The don’ts of exercise:

- Don’t exercise outside on very hot days. It is easier for you and your baby to get overheated and sick.
- Don’t lift heavy weights.
- Don’t play sports like soccer, basketball, and softball. There is a chance you could get hurt by a ball or another player.
- Don’t do activities where you might fall. Avoid exercises like skating, rollerblading, skateboarding, cycling, and horseback riding.

Listen to your body. Stop right away if you start to feel very tired, short of breath, or faint.
Like staying active, eating well is very important for both you and your baby.

Kimmy’s Tip for Breakfast

“Before I got pregnant, I skipped breakfast. Now that I have a growing baby, I know I have to get something on my stomach first thing. I have oatmeal and yogurt most mornings. Sometimes I have hardboiled eggs, if I make them the night before.”

Lori’s Tip for Lunch

“Lunch before I got pregnant? A fast food burger or fried fish with fries. Or a slice of pizza from the place next to my job. Or sometimes just a candy bar if I was busy. Now I pack a peanut butter and jelly on whole wheat bread along with some carrot sticks for lunch.”

Magda’s Tip for Healthy Snacks

“I want to be healthy, and I want a healthy baby. So I keep string cheese, whole wheat crackers, and fruit around. I even cut up some veggies and salad fixings and keep them in the fridge. Now when I get hungry in between meals, I reach for something good for me.”
Crystal’s Tip—Eat Smaller Meals and Eat Them More Often

“I eat lots of smaller meals now instead of three big meals. This helps with morning sickness. Plus, it keeps me from getting so hungry that I just eat junk.”

Try These Healthy Foods

Looking for a healthy snack or small meals to eat when you are pregnant? Try these great choices!

Check off the foods you will try:

- Whole grains like whole wheat bread, whole wheat pasta, oatmeal, and whole grain cereal (6 ounces each day)
- Vegetables (2½ cups each day)
- Fruits (1½ to 2 cups each day)
- Protein-rich foods like lean meats, poultry, fish, tofu, eggs, and beans (2 to 3 servings each day)
- Healthy fats like olive oil, canola oil, nuts, and avocados (2 to 3 servings each day)
- Calcium-rich foods like low-fat yogurt, skim milk, and low-fat hard cheeses (2 to 3 cups each day)

Want to learn more about the WIC program?

WIC stands for Women, Infants, and Children. Pregnant women who qualify for the program can get free and healthy foods like cereal, juice, milk, cheese, eggs, beans, peas, peanut butter, carrots, and tuna.

After your baby is born, you can also get formula on WIC. Talk to your doctor or local health department to learn more about WIC.

Try these tips for making healthy food choices:

- Choose fresh or canned fruits for a snack. Looking for something sweet? Try dried fruit like raisins instead of candy.
- Eat fresh or frozen vegetables instead of canned. They have less salt.
- Eat less fat. Take the skin off chicken and trim the fat off meat before eating. Go easy on butter and margarine and fried foods.
- Stay away from fast food.
- Avoid or limit foods and drinks with little nutritional value.

Looking for a quick meal? What about these?

- Chicken (skin taken off) with brown rice and green beans
- Hard boiled or scrambled eggs and wheat toast
- Lean hamburger with small salad
- Macaroni and cheese with broccoli
In the mood for a healthy snack? These are all foods that are good for you!

Try these snacks:
- Applesauce topped with cinnamon
- A piece of fruit
- Canned or fresh fruit and cottage cheese
- Cereal and milk
- Cup of tomato soup and crackers
- Cut up veggies and sliced cheese
- Glass of milk and graham crackers
- Light tuna mixed with a little low fat mayo
- Peanut butter on bread, crackers or an apple
- Yogurt with some cereal on top

Best tip when you feel like snacking?
Save your appetite for something healthy.
- Instead of white bread try whole wheat bread.
- Instead of chips reach for pretzels.
- Instead of candy go for something sweet like applesauce topped with cinnamon.
- Instead of high fat cookies, cakes, doughnuts, and pastries try fig bars or graham crackers.
- Instead of soft drinks or flavored powdered drinks, try juice mixed with some seltzer water—fizzy and yummy!

Calcium is great for you and your baby’s bones.
You can get great calcium from these foods:
- Almonds
- Beans (black beans, navy beans)
- Bok choy (a type of Chinese cabbage)
- Broccoli
- Cottage cheese with extra calcium in it (calcium fortified)
- Greens (turnip, mustard, collards)
- Kale
- Orange juice with added calcium
- Milk
- Molasses
- Sesame seeds
- Soy milk with added calcium
- Spinach
- Yogurt

Maddy’s Tip for Finding Serving Size

“I bought a measuring cup at the dollar store. It’s an easy way to keep track of serving size!”
Risky Foods

Some foods can be risky for your baby. You should limit how much of them you have.

You can have limited amounts of:

- Liver. Liver contains Vitamin A. Too much Vitamin A can cause birth defects. Only eat a very small portion (3-ounces) once in a while.
- Kinds of fish that may contain high amounts of mercury. Too much mercury can harm your baby. Do not eat more than two 6-ounce cans of white or albacore tuna a week. Or more than 6-ounces of tuna steak a week.
- Shrimp, salmon, pollack, catfish or light tuna contain less mercury – limit to 12-ounces total a week.
- Drinks that contain caffeine. These include coffee, tea, soft drinks with caffeine, colas, diet colas, and energy drinks. Drinking them can lead to miscarriage. And they can cause your baby to be too small at birth.

Dangerous Foods

Other foods can be downright dangerous for your baby because they may contain harmful germs. You should not have them at all.

Don’t eat any:

- Raw or undercooked meat, chicken, turkey and sushi (raw fish).
- Shark, swordfish, king mackerel, or tile fish (also called golden or white snapper).
- Over-easy or sunny-side-up eggs.
- Raw vegetable sprouts.
- Soft cheeses like feta, brie, camembert, and blue. If their label says “made with pasteurized milk,” they are okay.
- Refrigerated pates or meat spreads.
- Refrigerated deli meats or ready-to-eat meats like hotdogs and cold cuts. You need to heat them up to steaming hot, or they might give you food poisoning.
- Refrigerated smoked seafood like salmon, cod, whitefish, tuna, and mackerel. Only eat these if they have just been cooked.

Don’t drink any:

- Raw (unpasteurized) milk or foods made from it.
- Unpasteurized fruit or vegetable juices. These may say “fresh squeezed” on the label.

Beer, wine, and other alcoholic drinks can cause babies to have serious mental and physical defects for their whole life. Do not drink them while you are pregnant.
Taking Vitamins

Let’s listen in as two pregnant friends, Shawna and Ceci, talk about vitamins.

Shawna:

I never took vitamins before, but now my doctor says I need to take them while I am pregnant. What is your doctor saying?

Ceci:

My doctor says the same thing. And those vitamin pills are pretty big. Still—I want to do the right thing by this baby.

Shawna:

I do too.

Ceci:

I’m going to take them each morning. My nurse said to leave myself a note on the fridge so I won’t forget. She said to eat breakfast first. Then take a gulp of water, stick the vitamin in, put my head back a little, and swallow. I finish the glass of water. It works.

Shawna:

If you can do it, I can do it.

Ceci:

Look, the extra iron in these vitamins will help give us more energy and keep blood counts high. They are also good for our babies.
Vitamins are a good idea for most people. But they are very important when you are pregnant.

**Prenatal vitamins:**

- Help make sure that you have all of the ingredients your body needs to carry a healthy baby
- Contain folate to help your baby’s brain and spinal cord form well
- Usually contain extra calcium and iron your body needs

If you have morning sickness, you might try chewable vitamins. The downside? These vitamins don’t have all the nutrients you need. If you don’t eat any beef, chicken, turkey, pork, or fish, talk to your doctor. Vegetarians may need extra Vitamin B-12.

Need calcium? Taking Tums® as directed on the label is a great source of calcium. It can be bought over the counter. That means you don’t need a doctor’s prescription, and it may be covered by your health plan.

**Get the Facts on Folate**

**Q:** “I hear about folate all the time. Why is it so important for my baby?”

**A:** Folate is also called folic acid—a natural B vitamin. It does more than any other part of your prenatal vitamin to help you have a healthy baby.

Folate helps prevent brain and spinal cord birth defects in your baby. Since your baby’s brain and spinal cord form early on, you should take folate as soon as you find out you are pregnant.

New studies show that folate also helps prevent babies from being born too soon. Women who were trying to get pregnant took folate for a year before getting pregnant. The results? The moms had a much lower chance of having their baby too soon.
How Much Folate Do You Need?

If you are trying to get pregnant, you should have 400 mcg (micrograms) of folate (also called folic acid) each day. In fact, all women who are able to get pregnant should take a vitamin with folate in it each day.

If you are already pregnant, you should have between 800 and 1,000 mcg of folate each day.

Make Sure You Get Enough Folate

Your prenatal vitamin should include folate. Read the label to see how much it contains.

Folate may be added to foods like bread and pasta. Many breakfast cereals have all the folate you need in just one bowl. Check the label to find out.

Some foods are a good natural source of folate. These include broccoli, bananas, and nuts.
This section goes over 7 of the most common side effects of being pregnant. Read about the tried and true tips to help you feel well while you are pregnant. Talk to your doctor to get other ideas on how to manage.

**In this section, you’ll learn tips to manage:**

- Morning sickness
- Heartburn
- Constipation
- Swollen ankles
- Back pain
- Leg cramps
- Feeling tired

**Morning Sickness**

Women with morning sickness say they feel sick to their stomach. Some may vomit or throw up. Morning sickness can happen any time of day—not just mornings.

**How long it lasts:**

It varies from woman to woman. Also, it varies each time you are pregnant. Morning sickness often begins during the first month. In most cases, it goes away by the end of the 16th week. It is almost always gone by week 20. Some women feel morning sickness on and off the whole time they are pregnant.

**What helps:**

Certain foods can help lower morning sickness.

- Eat dry crackers in the morning.
- Eat plain foods like saltine crackers, broth, or gelatin if you feel sick to your stomach.
- Try ginger products. Some women find taking ginger capsules or crystallized ginger works. You may also want to suck on ginger candy or eat ginger snap cookies.
- Some caffeine free drinks such as ginger ale, ginger tea or peppermint tea help with sick stomach.

**Stay away from:**

- Spicy or fried foods
- Greasy foods

| Eat 5 or 6 small meals throughout the day so that your stomach doesn’t get empty. |

**When smells bring on morning sickness:**

- Smell a fresh cut lemon.
- Ask others to take out the garbage or cook if smells bother you.
- Ask others to pump your gas if the strong odor makes you sick.
Other healthy habits to lower morning sickness:
- Get out of bed slowly in the morning.
- Try not to get hot.
- Get plenty of rest each night.
- Don’t lie down for a nap after eating a meal.

Try vitamins:
Eat more whole grains, nuts, seeds, and beans. This raises the Vitamin B-6 in your body.

Ask your doctor about giving you extra Vitamin B-6.

Ask your doctor about a vitamin that might be lower in iron for the first 3 months.

If you have tried these tips and are still having problems ask your doctor about medicine. There are some very safe medicines that you can take by mouth.

Call your doctor if:
- You throw up blood.
- You can’t keep food or liquids down for a whole day.
- You throw up more than three times per day.
- You lose more than five pounds.
- You feel dizzy or feel faint because you can’t keep any fluids down.

Heartburn

Many women say they have heartburn while pregnant. Why?

1. Your hormones change how your whole digestive system works. Foods move slower through your system.

2. The area between your esophagus (food pipe) and your stomach gets more relaxed. Acids can move into your food pipe from your stomach.

3. Your growing womb also pushes on your stomach a little.

What helps:
- Ask your doctor about safe antacids.
- Eat five or six small meals over the day instead of two or three large ones.
- Wait an hour or two after you eat before lying down.
- When lying down, prop your head and back up with pillows. This puts your upper body higher than the rest of your body.

To avoid getting heartburn:
- Don’t smoke.
- Don’t drink alcohol.
- Stay away from high fat foods and chocolate.
- Stay away from spicy foods if they bother you.
- Stay away from caffeine in teas, coffee, and colas.
**Constipation**

Trouble having a bowel movement? This is called constipation. It can also lead to painful piles or hemorrhoids. Piles are swollen veins in and around the anus and the lower part of the rectum. They cause itching, pain, and bleeding at times.

**What helps:**
- Drink about one-half gallon of water each day, or 8 eight-ounce glasses. Talk to your doctor first if you have kidney or health problems.
- Eat a diet high in fiber. Get your fiber from foods like whole grains, bran, and fresh or dried fruits, like prunes.
- Put your feet up and rest as often as you can. Do this a few times each day.
- Wear loose and comfortable clothes and shoes.
- Stay active. Moving your muscles will help keep fluids from collecting in your ankles.

**Swollen Ankles**

You may find your ankles, feet, and hands are swollen the last few months. Some women feel swollen earlier. Be sure to tell your doctor if you notice swelling because it can be a sign of high blood pressure that could hurt you and your baby.

**What helps:**
- Drink at least 6 to 8 glasses of water each day.
- Eat less salty foods and don’t add salt to your food.
- Eat less salty foods and don’t add salt to your food.
- Stand up straight and push your shoulders back. Good posture helps lower back aches.
- Keep your back straight up and down when you lift things off the ground. Use your legs.
- Wear low-heeled shoes with good foot support.

**Back Pain**

You may find that you have to lean back to keep your balance as your belly grows. This makes a curve in your lower back. The added stress on your muscles also leads to back pain.

**What helps:**
- Get a “belly belt” at a store that sells maternity items. This support belt helps hold your back and growing belly.
- Stand up straight and push your shoulders back. Good posture helps lower back aches.
- Keep your back straight up and down when you lift things off the ground. Use your legs.
- Wear low-heeled shoes with good foot support.

Do some simple exercises to keep your back strong.
- Do pelvic tilts. Stand with your back to a wall and pull your tummy muscles up and in. Now tighten your buttocks. Press your lower back toward the wall in back of you.
• Ask your doctor for exercises to make your lower stomach muscles stronger.
• Stretch your back with yoga or other exercises.

**Leg Cramps**

Painful leg cramps can sometimes come during the last half of pregnancy. They will come more often at night. Doctors are not sure of the exact reason.

**What helps:**
• Move! Try not to sit or stand in one position for a long time.
• Stretch each leg and your calf muscles for 20 to 30 seconds before you go to bed.
• Massage the muscle when you get a cramp.
• Stay active during the day. Try to take a walk every day.
• Drink 6 to 8 glasses of water a day. Talk to your doctor first if you have health or kidney problems.
• Take your vitamins.

**Feeling Tired**

Many women feel very tired in the first few months. You may also be very tired during the final month or two. Listen to your body and get more rest!

**What helps:**
• Take a nap or take a few rest periods each day.
• Get enough sleep. Go to bed earlier than you did before you had a baby on the way.
• Eat a healthy diet.
• Take your prenatal vitamins.
• Ask family or friends to help you with housework or tasks that wear you out now.
• Stay active. Believe it or not, exercise at the start and middle of your pregnancy can give you more energy.
When Sex Is Not Safe

Most women can have sex while they are pregnant. Yet, for some women sex may not be safe. Has your doctor said you have a “high-risk” pregnancy? Read on to learn when you may need to avoid sex.

High-Risk Pregnancies

Your doctor may advise against having sex if you have:

- Bleeding from your vagina that can’t be explained
- A chance of having a baby too soon who is too small
- A low lying placenta (placenta previa)
- Problems with preterm labor now or before

Sexual Practices You Should Avoid

For the health of you and your baby don’t:

- Have sex with a partner who has an STD. STD is short for sexually transmitted disease. That means an infection you get through having intercourse, anal sex, or oral sex. If you get an STD, you can pass it along to your baby.
- Have intercourse if you don’t know about your partner’s sexual history.

Talk With Your Partner

Make sure to talk with your partner. While this is an exciting time in both your lives it can also be stressful for a couple. So keep talking and sharing so that you can support each other.

When Things Go Wrong—Health Problems in Pregnancy

Once in a while, there are problems with a pregnancy. It’s important to know about them so that you can prevent or treat these problems.
Preterm Labor—What You Need to Know

“My next-door neighbor went into preterm labor. Her little boy was a preemie—just 3 and a half pounds. Corey was born way too soon and was just too small. He had bad lungs and had to stay in the hospital for a couple of months. There were times when we didn’t know if he would make it. Now he is on an apnea monitor that he’ll need until he is about 5 or 6 months old.”

Preterm labor is also called premature labor. A baby born between weeks 20 and 37 is called a preemie. Most pregnancies are full term and last between 37 and 42 weeks.

Know the Signs of Preterm Labor!

It’s important to know the signs of preterm labor. If you have any of these signs more than 3 weeks before your due date, you may be in preterm labor:

- Contractions that come as often as 4 times in an hour
- Cramps that feel like you’re having your period
- A feeling of pressure in your pelvis or lower belly
- Bleeding from your vagina, or a pink-tinged discharge while you are cramping

If you think you are having preterm labor, call your doctor or go to the hospital right away.

What Your Doctor May Say

If you call about preterm labor, your doctor may tell you to go to the office or hospital for an exam.

Or your doctor may ask you to take these steps:

- Stop what you are doing and lie down on your left side.
- Drink 2 to 3 glasses of water or juice.
- Time your contractions. That means wait until the contraction is over. Then look at the clock to see when the next one starts. Write down the time in between.
- Watch your symptoms for an hour. If they continue or get worse during that time, call your doctor again, or go to the hospital. If your doctor thinks that you are in labor, he or she will then decide how to treat you.
**Who Has Preterm Labor?**

Preterm labor could happen to any woman. But there are things that raise the chance of giving birth too soon.

You are more likely to have a preterm birth if you …

**Have certain physical problems:**
- Your womb is not shaped normally.
- Your cervix is too weak.
- There are problems with your placenta.
- Your bag of water breaks too early (premature rupture of membranes).

**Have certain health problems:**
- You have an STD (sexually transmitted disease).
- You have diseases like diabetes, high blood pressure, or asthma that are not treated well.
- You have a bladder infection that was not treated.
- You were underweight before your pregnancy.

**Have a risky lifestyle:**
- You smoke, drink alcohol, or use drugs while pregnant.
- You are under a lot of stress.
- You had late prenatal care or no prenatal care.
- You work long hours while standing.
- You have had physical, sexual, or emotional abuse.

**You are also more likely to have a baby born too soon if you:**
- Had a preterm baby before.
- Gave birth less than 9 months before the start of this pregnancy.
- Are pregnant with more than one baby (twins, triplets, or more).
- Are carrying a baby who has a birth defect.
- Are African-American or Hispanic.

**Did you have a preterm baby before?**

That means you are more likely to deliver too early again. The good news is that there are ways to stop this from happening. Talk with your doctor about a new medicine called 17P. This can help prevent another preterm birth.
Call your doctor right away if you are bleeding from your vagina. Bleeding from your vagina while pregnant could be nothing serious. Or it could mean that something is wrong. So it’s important to know why it’s happening.

If you are pregnant and are bleeding from your vagina, call your doctor right away.

What Your Doctor Will Do

If you have more than a little spotting, your doctor may do some blood tests and an ultrasound. The ultrasound can help look for a growing baby or a beating heart. It may also give a good view of the bag of water where the baby is growing. In some cases, the baby may not be big enough to show up well in the ultrasound.

Why Bleeding Happens

Light bleeding in early pregnancy may be caused by having sex. Follow your doctor’s instructions if the bleeding is due to having sex.

More serious bleeding may happen if:

- You are having a miscarriage—loss of a pregnancy before the 20th week. Read the next section to learn more about miscarriage.
- You have an ectopic pregnancy. That means the pregnancy is in a tube instead of your womb. If your doctor finds out that this is true, you will be treated with surgery or with medicine. Sadly, the baby can’t survive.
A miscarriage means loss of a pregnancy before the 20th week. It happens more often during the first 12 weeks of being pregnant.

Why Do Miscarriages Happen?

We do not fully understand why women miscarry. Most early ones happen because of problems with the baby’s genes and chromosomes. Some happen because the baby just did not implant and grow well. It is important to see the doctor after you miscarry. Since you will need to wait before getting pregnant again, make sure you ask your doctor about birth control.

Getting Pregnant After You Miscarry

The chances that everything will go well the next time you get pregnant are very good. If you do get pregnant again, make sure you see a doctor as soon as possible.

Feeling low? Talk to your doctor or nurse. Ask if there is a program at your local hospital or clinic to help you cope with feelings of loss after you miscarry.

“My husband and I are breathing a sigh of relief now that I am in my 26th week. Two years ago, I lost a baby when I was 9 weeks pregnant. We are not sure why, but the baby just didn’t implant and grow the right way. This time we are feeling that things will be fine.”
Q: What is a UTI?

A: You may hear your doctor or nurse talk about UTIs. That term is short for urinary tract infections. Or, simply put, an infection in your bladder, kidney, or urethra (the tube that carries pee from your bladder to outside your body).

Q: Why am I getting bladder infections now that I am pregnant? I never had them before!

A: When you are not pregnant, your body works quickly to get rid of any germs (bacteria) that find their way into your urinary tract. When you are pregnant, however, your body does not do this as well. If the germs stay, they will cause an infection.

Q: Why does my doctor ask for a pee sample every time I go in for my visits?

A: You may have a bladder infection and not know it. This is one reason your OB checks your urine at your office visits.

Q: I had a bladder infection and it didn’t hurt. Why all the fuss?

A: At first, an untreated bladder infection can seem harmless. But if it is not treated, it can create big problems. The infection could move up into your kidney. Kidney infections can cause terrible pain, fever, and chills. They also need to be treated with IV antibiotics in the hospital.
Q: Can bladder infections really lead to having a baby too early?

A: Yes. A bladder infection that is not treated can cause early or preterm labor and delivery. If the bladder infection spreads into the water around your baby, the water will break due to damage from the infection. Preterm babies are at risk for health problems (see page 31).

The good news is that you can get treatment for bladder infections. Pay attention to what your body tells you and listen to your doctors and nurses.

Signs of Bladder Infection

If you have a bladder infection, you may:

- Pee more often than usual
- Have cramps

You may feel:

- Like you have to pee, but not much urine comes out (“urgency”)
- Sick to your stomach
- Pressure behind your pubic bone
- Stinging or burning when you pee

Your urine or pee may:

- Be cloudy
- Smell strong or bad
- Look pinkish or bloody

If you notice any of these signs, call your doctor. Keep in mind that you may have all, some, or none of these signs, and still have a bladder infection. Only a urine test will tell for sure. That’s one good reason to go to all of your doctor visits.

Signs of Kidney Infection

A kidney infection is serious. Call the doctor right away if you:

- Have bad pain in the middle or side of your back
- Feel sick to your stomach
- Have chills or fever
- Have blood in your pee

Preventing Bladder Infection

Keep your bladder healthy! Try these tips:

- Drink about 6 glasses of water each day.
- Pee soon after you have intercourse.
- Know the signs of bladder infection.
- Make sure your urine is checked at your doctor visits.

If you do get an infection, take your medicine correctly until it is gone.
Diabetes During Pregnancy

Diabetes is a disease of high blood sugar. If you have high blood sugar during pregnancy, you are said to have gestational diabetes.

**Why Treatment Is Important**

High blood sugar can cause serious health problems for you and your baby. You need to get treatment right away.

**Dangers of Gestational Diabetes**

During the first trimester, diabetes can raise the chance of:
- Birth defects
- Miscarriage

During the second and third trimesters, diabetes can increase the risk that:
- Your baby will be very large, which can make labor and delivery hard
- Your baby will have low blood sugar after birth
- Your baby will be born dead (stillborn)

**Signs of Diabetes**

Tell your doctor right away if you have any of these signs:
- Being very thirsty all the time
- Needing to go to the bathroom a lot (frequent urination)
- Being very hungry all the time
- Losing weight even when you are eating
- Blurry vision

**Testing for Diabetes**

Your blood sugar should be tested between weeks 24 and 28. This is called a glucose tolerance test.

If this test turns out abnormal, you will likely need a second test called a three-hour test.

**Treating Diabetes**

If you have gestational diabetes, you will need to take extra care of yourself. Take these steps:
- Check your blood sugar. Your doctor will teach you how to do this.
- Follow an eating plan that will help control your blood sugar.
- Keep active each day. Check with your health plan to learn more about the Smart Steps for Your Baby walking program.
- Take insulin if diet and exercise do not control your blood sugar.
- Go to all doctor visits, even if you feel well.

**Who Gets Gestational Diabetes**

This health problem could happen to any woman. But there are things that raise the chance of having high blood sugar.

**You are more likely to get gestational diabetes if you are:**
- Hispanic,
  - Native American, Asian, or African American
- More than 30 years old
- Overweight

**You are also more likely to get diabetes if you have:**
- A strong family history of diabetes
- Sugar (glucose) in your urine
- Had gestational diabetes, a large baby, or a stillborn baby before
PIH—High Blood Pressure When You Are Pregnant

PIH is short for pregnancy-induced hypertension. This health problem is a type of high blood pressure that can happen during your term. PIH is also called toxemia, or preeclampsia.

If you have PIH:
- Your blood pressure goes up to at least 140/90. Blood pressure is the force of your blood against the walls of your arteries.
- Your body retains water. This causes your hands, feet, and ankles to swell.
- There is protein in your urine.

Why Treatment Is Important
If you have PIH, you need to get treatment right away. High blood pressure can cause serious health problems for you and your baby.

Signs of PIH
Watch out for these signs that you may be developing PIH:
- Your hands, feet, and face are puffy.
- You gain a lot of weight in just 2 or 3 days.
- Your vision changes. For example, you may see bright lights or dark spots.
- You have pain on the upper right side of your belly.
- You have headaches that do not go away with acetaminophen (Tylenol®).
- You feel sick to your stomach.

If you have any of these warning signs, call your doctor right away.

Treating PIH
If you have PIH, your doctor may recommend that you:
- Rest in bed
- Stay at the hospital
- Deliver the baby early
If you have PIH:

- Follow your doctor’s instructions carefully.
- Go to all your doctor visits.
- Cut back on salt.
- Go to the hospital if your headache does not go away or you see dark spots or bright lights.

Who Gets PIH?

You are more likely to get PIH if you are:

- A first-time mom
- Pregnant with two or more babies
- A teenager
- Older than 40

You are also more likely to get PIH if you:

- Had high blood pressure or kidney disease before you got pregnant
- Have a mom or sister who had PIH

PIH is more common late in pregnancy. But some severe cases occur as early as weeks 25 to 28.
Giving Birth to Multiples

Having twins or triplets? Carrying more than one baby can mean you will need to:

- Get extra rest and stay off your feet more.
- Ask for extra help with household chores if you need it.
- See your doctor more often than if you were carrying just one baby.
- Gain a healthy weight. When you are carrying more than one baby, it is not healthy to be underweight. Talk to your doctor about what is a healthy weight gain for you.

Moms having twins have a greater chance of:

- Getting gestational diabetes (high blood sugar). See page 37 for more information.
- Having high blood pressure. Turn to page 39 to learn what steps you can take.
- Having a preterm labor and giving birth too early. See page 31 to learn about the signs.

You may feel different ways at different times while you are pregnant. Do you find yourself feeling happy one moment and near tears the next? Feel tense for no reason? Your body has lots of hormones that can bring on a range of feelings. These ups and downs happen to a lot of women. Feeling a bit emotional while you are pregnant is normal.

If you find yourself feeling very sad or anxious, though, talk to your doctor or a trusted friend. Feeling this way can be harmful for you and your baby.

Taking Care of Your Emotions

“I got to the point where I was so stressed that I couldn’t sleep at night. I’d lie there thinking about money. I worried about how I was going to finish school, keep a job, and raise my baby. When I broke down crying at breakfast one morning, my aunt said it was time to talk to my doctor. All that stress was making me and my baby sick.”
Getting Ready for the Big Day

Your baby is coming soon. There’s a lot to do to get ready, from taking care of yourself to getting baby supplies.

Childbirth and Parenting Classes

Taking childbirth and parenting classes can help prepare you and your partner for labor, birth, and being new parents. Your partner should be the person you want to be in the labor room with you when you have your baby. This person is sometimes called your labor coach.

Why Go to Childbirth Class?

Childbirth class teaches you about what to expect while you are pregnant. You and your partner will learn about what happens at birth. You’ll get a tour of the hospital. And you can bond with other parents-to-be like you.

Read what these people liked about childbirth class:

Dee Dee:

“I learned how to relax during labor.”

Raymond:

“You get to know what to do to be a good coach. We got the breathing down pat.”

Cherise

“My husband and I met other couples our age. We sit around talking after class each week. It’s fun.”

Anna:

“My mom was my coach. There were lots of women there with a mom, sister, or aunt. I learned so much about what to expect during labor.”
Why Go to Parenting Class?

Parenting class helps you learn how to care for and relate to your new baby. You’ll gain tips on when to call the doctor. You’ll learn how to make your home safe. And best of all, you will meet other new expectant parents.

Read what these people liked about parenting class:

Tina:

“I am a first-time mom, and I wanted to learn all I could.”

Kendra:

“Even though I have younger brothers, I still wanted to learn more about infant care.”

Tyree:

“I am clear on how to give a baby a bath now. This is my baby, and I want to be a good dad.”

Jim:

“*My fiancée* wanted me to go with her, so I did. I’m the youngest in my family, and I never really was around little newborns before. Going to the class together brought us closer. Now I feel like I know what I’m doing.”

Want to find a childbirth or parenting class near you? Ask your doctor, call your health department, or visit the hospital where you are going to have your baby.

Learn as much as you can about being pregnant, childbirth, and parenting. Reading this booklet is a great first step.

Here are some ways to learn more:

- Get books out of the library, or borrow them from a friend.
- Look at websites. Visit www.startsmartforyourbaby.com
- Talk to other moms and dads who have been there.
- Bring a list of questions to your doctor visit, and write down the answers. Your doctor and nurses are there to help you!
Taking Care of Older Children

If you have other children:
- Plan who will care for them while you are giving birth and recovering.
- Talk with them about what to expect when the new baby arrives.

Choosing Your Baby’s Doctor

It’s time to choose a pediatrician or a family doctor. A pediatrician is a doctor who treats babies and children. A family doctor takes care of patients of all ages. Call your health plan or talk to your OB for names if you need help.

Jen’s Tip:

“Choosing your baby’s doctor is very important. It is best to find a doctor you like and trust before your baby is born. This way you have time to meet and select a doctor who fits your needs. You and your baby will be seeing the doctor for both well-baby care and when your child is sick.”

Getting Ready for the Hospital

It’s a good idea to pack your bag and your baby’s bag a few weeks before your due date. Use this checklist as you pack.

For Me:
- Extra underwear
- Hairbrush
- Insurance card
- Loose clothes to wear on the way home
- Nightgown
- Robe
- Slippers or warm socks
- Toothbrush and toothpaste

For My Baby:
- Baby blanket
- Baby wipes
- Onesie or undershirt
- Outfit for photos
- Infant carseat for the ride home (You won’t be allowed to take your baby home without it.)

Ask your friends and family to bring along a camera to capture baby’s first day!
Gearing Up for Baby

Try to get supplies for your baby ahead of time. Use this checklist to help you find the things you need. Ask friends and family members if you can borrow items.

To Wear:
- Booties or socks
- Hats
- Onesies
- Sweaters
- Stretch suits with feet
- Sleepwear – one-piece pajamas or nightgowns

For Bathing:
- Baby bathtub
- Baby lotion for after the bath
- Baby shampoo
- Baby washcloths
- Hooded bath towels
- Liquid baby soap

For Sleeping:
- Bassinet or cradle
- Crib and mattress
- Tight fitting crib sheets
- Quilted mattress pads
- Small, light receiving blankets
- Waterproof pads

Don’t cover your newborn with a comforter or heavy blankets. Use a blanket sleeper or lightweight baby blanket instead.

For Eating:
- Bibs
- Bottles and nipple for breast milk or formula
- Bottle and nipple brushes
- Burp cloths or cloth diapers for spit-ups

If You Breastfeed:
- Breast pump to collect milk. Sometimes you can borrow or rent the pump from the hospital.
- Lanolin cream to soothe sore nipples
- Nursing pads to wear in your bra

For Changing:
- Diapers
- Diaper pail
- Baby wet wipes
- Diaper rash cream
- Changing pad and table
- Diaper bag and changing pad to go in your diaper bag

For Laundry:
- Fragrance-free soap and fabric softener. These are much less likely to bother your baby’s skin.

For Healthcare:
- Cool mist humidifier to ease baby’s breathing when the air is dry
- Medicine dropper or baby spoon to measure medicine
- Nasal suction bulb
- Thermometer
For Travel:
- Blankets to cover your baby while you are outside
- Front pack or backpack to carry your baby in for the first six months
- Infant carseat
- Stroller

Other Useful Supplies:
- Playpen
- Rocking chair
- Safe toys
- Safe baby swing (Avoid the kind that hangs from a doorway.)
- Pacifiers, if you decide to use them

Remember—while it’s nice to have these items, love is the greatest gift you can offer your baby. The thing your baby needs most is you!

Bargain Tips
Outfitting your baby doesn’t have to cost a fortune. Read what these parents did to make baby gear more affordable.

Lisa:
“My cousin gave me a big bag of clothes and baby items from her son. I washed them up before the baby came. I also borrowed her crib, and that helped out a lot.”

Cody:
“My girlfriend and I hit the garage sales, and we found some really amazing stuff. We got a crib, a bathtub, and tons of clothes.”

Brandi:
“I bought these plastic bins from the dollar store. They were great to keep my baby’s clothes and bath items in.”

Justin:
“We went to the thrift shop and found good stuff for our baby. All the clothes were in great shape and low priced.”
The Big Day Is Here!—Labor and Delivery

How to Know If You Are in Labor

It’s been a long nine months, and you’re eagerly awaiting the arrival of your baby. So how will you know when you finally are in labor? Learn the signs of labor and the difference between true and false labor by reading this section.

Signs of False Labor

Before true labor begins, you may feel your womb tighten up. This squeezing is called a Braxton Hicks contraction, or practice contraction.

Your contractions are probably just practice contractions if they:

- Are not painful
- Do not have a regular rhythm
- Go away after a short walk

Practice contractions are okay if you are in your final month of pregnancy. If you are not in your final month, you could be having preterm labor and your baby could be born too soon. See page 31 for more on preterm labor.

If you are having any type of contraction more than one month before your due date, call your doctor right away. You may be in preterm labor (see page 31).

Signs of True Labor

Although signs of labor may vary from woman to woman, here are some common ones. Take a few minutes to read through this list.

Lightening

This is the process of your baby “dropping” or settling into your pelvis. Lightening may occur 2 to 4 weeks before labor in first-time moms. Or it may happen just a few hours before labor begins if you have had a baby before.

Bloody Show

You may notice a slightly brown, pink, or red stain on your underwear or toilet tissue. This shows that you have lost the mucus plug from your cervix as it thins and opens.

Rupture of Membranes

This means that the bag of water around your baby has broken. You may feel fluid coming from your vagina. Some women feel a big gush. Others feel a little leaking. If you think your water has broken, don’t use a tampon, get in the tub, or have intercourse.

True Contractions

Unlike the practice contractions you had earlier in pregnancy, true contractions get stronger and more frequent. You can feel your entire womb squeezing. Some women say they feel like a belt is getting tighter and tighter around them.

Are the contractions coming less than 10 minutes apart? Do they take your breath away? This may mean that true labor has begun.

Pain in Your Lower Back

You may feel a regular pain that gets worse in your lower back. This back pain spreads to your lower belly, and maybe even to your legs.
If you have any of these signs more than 3 weeks before your due date, call your doctor right away. You may be in preterm labor (see page 31).

If you’re really in labor!

“I admit, at first I was a little scared about giving birth. But taking childbirth classes really helped. I know about what to expect and know how to relax. I know there are medicines if I need them. Really, just being prepared makes me feel ready.”

The big day has finally arrived! You are in true labor and need to go to the hospital to have your baby. What should you expect?

Just as you have taken care of yourself throughout pregnancy, you need to take care of yourself now. Take these steps to give yourself the best chance to have a relaxing, memorable experience:

Step 1
Make sure you get rest. It may be hard to do, but ask others to pitch in and help. Eat regular, small, healthy meals. Keep up your strength.

Step 2
Talk to the people you want to be with you at the birth. Tell them you are in labor. It is always nice to have family support.

Step 3
Ask someone to help you keep hospital visits short. Having too many people around can be too much on you. Let people know they can come visit when you get home.

At the Hospital
Once you arrive at the hospital, you will most likely:

- Fill out some papers
- Go to the labor and delivery unit
- Change into a hospital gown
- Be checked by a nurse or doctor to see how much your cervix has opened
- Go to your room if you are in active labor
- Meet the nurse who will care for you
- Be hooked up to a monitor. This records your contractions and keeps track of your baby’s heart rate.
3 Stages of Childbirth

A normal vaginal delivery has 3 stages: labor, pushing and delivery, and delivery of the placenta.

Stage 1—Labor

Labor is hard work! It is usually the longest part of childbirth.

At first, your contractions may feel like strong cramps—sort of like when you have your period.

As labor continues:

● Your cervix slowly opens.
● Your contractions get stronger, longer, and closer together.

Stage 1 ends when your cervix has fully opened.

Stage 2—Pushing and Delivery

This stage often lasts 2 to 3 hours or more.

Now that your cervix has fully opened, you are ready to start pushing. You may feel better because you can now do something active to help!

Your contractions move your baby down the birth canal to the opening of your vagina. You help your baby along by pushing.

Stage 2 ends when your precious baby is born. That’s the delivery part!

Don’t be surprised if your baby’s head is swollen or cone-shaped from squeezing through the birth canal. It will go back to normal soon.
Stage 3—Delivery of the Placenta

This stage usually lasts 30 minutes or less. It begins right after the birth of your baby. It ends when the placenta comes out of your vagina.

About Umbilical Cord Blood

After your baby is born there is some leftover blood in the cord. Some hospitals will let you arrange for the donation of this blood to a cord blood bank. This means the extra cord blood can be used to treat diseases in other people. You can also save that blood for your own family’s use. You can ask your doctor about saving your baby’s cord blood. The company that stores the cord blood does charge some fees for safely storing the cord blood in case a family member may need it later.

Induced Labor

Your doctor may want to get your labor started or speed up labor. This is called induction.

Here are some reasons you might be induced:
- You are a week or more past your due date.
- You have very high blood pressure.
- You have a health problem like diabetes.
- There are problems with your baby’s health.

There are different forms of induction. Your doctor may take some or all of these steps:
- You may get a medicine called pitocin through an IV. This will help your womb contract.
- You may get a medicine in your vagina to soften your cervix.
- Your “bag of water” may be broken to help get labor going.

Most cases of induction go well, and the baby is delivered through the vagina. But sometimes it leads to problems. Talk about the pros and cons with your doctor.

When Baby Is Stuck

Once in a while, a baby gets stuck in the birth canal. Here are some ways to get the baby out.

Forceps Delivery

Forceps are 2 big spoons. In a forceps delivery, the doctor places the forceps along both sides of the baby’s head. They help gently guide the head down the birth canal until it is out.

Vacuum Extraction

A vacuum is a small suction cup. In a vacuum extraction, the doctor puts the vacuum on the baby’s head. This tool helps bring the baby down and out. You still need to help by pushing.

After a forceps or vacuum delivery, you may notice bruising or small cuts on your baby’s head. These will heal in a few days.

Episiotomy

An episiotomy is a cut made next to your vagina. It can help your baby get out. Your doctor will stitch up the cut after delivery.
Managing Pain During Delivery

Yes, childbirth can be painful! But there are lots of things you can do to cope with the pain. Read what worked for these moms.

Tanya:

“Massage really worked for me. My husband kneaded my back—the harder, the better!”

Marielle:

“I listened to music on headphones. It really took my mind off the pain!”

Leeza:

“Moving around helped me. I must have walked the halls a hundred times. Even when I couldn’t get out of bed, I kept changing position.”

Sherri:

“My mom stayed with me the whole time. Her love and support meant the world to me. They made me feel strong!”
There’s no “right” way to deal with pain. Just do whatever works for you! And remember—the pain has a very important purpose: getting your baby into the world!

**Pain Medicines**

There are many different medicines for pain control during childbirth. Here are some of them.

**Analgesics**

These pain medicines take the edge off mild contractions. They do make you sleepy, so they should be used only in early labor. You may get them through an IV.

**Epidural Anesthesia**

When they are in a good strong labor, some women choose to have an epidural to manage pain. The epidural numbs the nerves in your body below your belly button. And it allows you to focus on the hard work of delivering a baby. It is a safe and effective method.

Want to learn more? You will have chances to talk to nurses, doctors and your childbirth educator about this method ahead of time. The decision to have an epidural is one for you to make with your doctor and nurses.

**What Do You Need to Do?**

To get an epidural, you:
- Sit up on the side of the bed
- Hunch over and push out the lower part of your back
- Stay still until the procedure is done

**What Does the Anesthesiologist Do?**

An anesthesiologist is a doctor who is an expert at giving anesthesia.

This specialist:
- Finds the bony part of your lower spine and numbs the skin there
- Inserts an open needle in a special space in your spine (the epidural space)
- Slides a tube into the needle
- Puts medicine in the tube

Before taking any pain medicine, talk with your doctor about the pros and cons.
Having a C-Section

Most babies are born through their mother’s birth canal, or vagina. But about 1 in every 4 babies in the U.S. is born by C-section, or Cesarean section.

When Is a C-Section Done?

Sometimes problems before or during labor make vaginal delivery too risky. If this happens, a C-section will be done.

You may know ahead of time that you will have a C-section. Or it may be an emergency.

A C-section may be done if:

- You or your baby has a health problem
- Labor goes on too long, and you or your baby starts to have trouble
- Your doctor thinks your baby is too big to go safely through your birth canal
- Your baby is turned the wrong way, with its feet or butt entering the birth canal first
- You have had other C-sections. (Vaginal birth after C-section may be possible. This is called VBAC.)

What Happens in a C-Section?

Here’s what to expect if you get a C-section.

Before the C-Section

You go into the operating room and get medicine to take away the pain (see page 51). A sheet is draped over your legs. A small tube is placed in your bladder to collect pee.

During the C-Section

Your doctor:

- Cuts through the layers of your skin to reach your womb
- Makes a small cut in your womb
- Takes your baby out
- Closes the layers with stitches

After the C-Section

Your nurse:

- Gives you fluid through your IV
- Gives you ice chips to suck
- Gives you pain medicine as needed

During a C-section, you can stay awake and watch the birth by looking up at a mirror.

Before getting a C-section, talk with your doctor about the pros and cons.
Your Recovery—Bouncing Back After Childbirth

“Having a baby was a lot of work! My baby stayed in the room with me most of the time and it was so nice to start to get to know him better. When I needed a bit of sleep Eddie went to the nursery. We’re going home tomorrow. I’m glad my husband is off the next few days and my sister is staying over. That will really help me.”

Bouncing Back From Vaginal Delivery

It takes time to recover from giving birth. Here’s what to expect.

At the hospital, you may:
- Stay for about 2 days
- Have your vital signs checked often (vitals include heartbeats per minute, breaths per minute, temperature, and blood pressure)
- Get help with pain control
- Get help caring for your baby
- Have your womb massaged to help it contract and prevent bleeding

At home, you may:
- Feel tired
- Have cramps for 7 days or longer as your womb shrinks back to its normal size
- Have bleeding and discharge from your vagina for a few days
- Get sore and swollen breasts as they fill with milk
- Have a sore bottom, painful piles (hemorrhoids), and trouble peeing or having a bowel movement
- Feel moody, sad, or blue for a few weeks (see page 55)

After a Vaginal Birth

Don’t take baths, douche, use a tampon, have sex, drive, or exercise until your doctor tells you it is okay.

Bouncing Back From C-Section

It takes 4 to 6 weeks longer to recover from a C-section than from a vaginal delivery. Try to be patient! Here’s what to expect.

At the hospital, you may:
- Stay for about 3 or 4 days
- Get pain medicine through your IV or epidural at first
- Take pain medicine by mouth later on
- Begin to get out of bed, move around, and go to the bathroom with help about a day after the C-section (This speeds your recovery.)
- Have your wound checked to be sure it’s healing the right way

At home, you may:
- Feel tired
- Have painful cramps for 7 days or longer as your womb shrinks back to its normal size
- Feel some soreness, numbness, and itching around your scar
- Have sore and swollen breasts as they fill with milk
- Feel moody, sad, or blue for a few weeks (see page 55)
After a C-section:

- Hold your belly when you sneeze or cough.
- Use pillows for extra support while feeding your baby.
- Try not to go up and down stairs a lot.
- Don’t take a bath until your scar heals. Ask your doctor when you can shower.
- Don’t lift anything heavier than your baby.
- Don’t do a lot of housework. Ask others to help you.
- Don’t spend too much time in bed or on the couch. Gentle moving will help you heal more quickly.

Ways to Feel Better

You can feel better! Try these ways to deal with common problems.

Sore Breasts (If Not Breastfeeding)

- Wear a firm bra that supports your breasts.
- Use cold packs for 1 to 5 days until your milk stops coming in.

Sore Bottom

Check the things you will try:

- Use a cold pack.
- Take a sitz bath. This means soaking a bit in a small, shallow plastic tub.
- Use cotton balls or pads soaked in witch hazel. You can buy witch hazel at a drug store.
- Wash your bottom several times a day with a spray bottle or peri-bottle given to you in the hospital.
- Soothe piles (hemorrhoids) with over-the-counter ointments or creams.
- Take pain medicine as needed, if your doctor says it’s OK.

Feeling Very Tired

Check the things you will try:

- Get as much rest as you can.
- Focus on the things you need to do, and let the other stuff wait.
- Try to nap, eat, sleep, and shower when your baby is napping.
- Eat a healthy diet, and drink plenty of fluids.
- Keep taking your vitamins.
- Limit visitors.
- Ask family and friends to help you.
They can:

- Bring over a meal
- Do a load of laundry
- Wash the dishes
- Clean up the kitchen
- Take care of your baby

If you get really tired, ask a family member or friend to stay the night. They can get up and feed your baby a bottle of breast milk or formula. That way, you can catch up on much needed sleep!

Call your doctor if you:

- Have a fever
- Notice any redness, opening, bad odor, or fluid leaking from your C-section wound.
- Have heavy bleeding from your vagina
- Have any other concerns

Baby Blues

If you get the baby blues:

- Get as much rest as you can
- Accept help from family and friends
- Talk with other new mothers

Remember that post-partum blues are very common and can happen to anyone. There is nothing you did wrong. Most likely you will start feeling better in no time.

When the Baby Blues Last—Postpartum Depression

Sometimes a woman can become very depressed after she gives birth. This health problem is called postpartum depression.

Signs of Postpartum Depression

If you have postpartum depression, you may:

- Feel very sad, “down,” or depressed
- Have trouble sleeping (even when the baby is asleep or when others are caring for the infant)
- Lose interest in things that you used to enjoy
- Feel guilty
- Lose energy
- Have trouble keeping focus
- Change your eating habits
- Not take care of yourself or your baby
- Think about harming yourself or others

If you have any of these signs, call your doctor. Don’t let these feelings go on for a long time.

Getting Help

Know that you are not alone—other women get depressed after they have a baby. Some women find that talking to a counselor can help. Others use medicine for a little while to help the depression lift.

You may feel like this low feeling will never go away. It is good to know that this type of depression can be treated with great results. There is help!
Breast Milk or Formula?

One of the important choices you will need to make is whether to give your baby breast milk or formula. It is good to get the facts as you decide. The choice is very personal and should be one that works best for you and your baby. Read this section to learn more about both choices.

Your Questions Answered

Q: What if I don’t want to or can’t breastfeed?
A: First off, don’t feel guilty. Make the decision that is best for you at this time in your life. The choice is up to you.

Q: Is every woman able to breastfeed?
A: Almost every mom can breastfeed. The size of your breasts doesn’t matter. Talk to your doctor first if you have HIV or you abuse street drugs or alcohol. On prescription drugs? Read the label and talk to your doctor before you breastfeed. Let your doctor know if you’ve had breast surgery, because sometimes that can lower the amount of breast milk you make.

Q: I have Hepatitis. Can I breastfeed?
A: Moms with Hep B or Hep C can breastfeed. Just be sure to talk to your doctor first.

Q: I am a vegetarian. Can I still breastfeed?
A: Talk with your doctor or nurse. You may need to take extra vitamins.

Q: How can I find out more about breastfeeding?
A: Talk to your doctor, nurse, or childbirth educator before your baby is born. Ask questions after you deliver your child. The hospital staff can help you with breastfeeding. Sometimes moms talk with a person called a lactation consultant. This person is trained to help moms with breastfeeding.

Why Breastfeed?

“Both my cousins are nursing their babies, and they say it’s much easier than mixing formula and washing bottles. My doctor told me that breastfeeding will help my baby get fewer colds and ear infections. That sounds good to me, so I’m going to try to breastfeed my new baby.”
**Good for Baby**

Breast milk is the perfect food for babies. It is packed with the right mix of nutrients and proteins that can keep your baby from getting sick. Studies show that breast milk can protect your baby from getting allergies, diabetes, heart disease, and cancer later in life.

**Good for You**

Nursing can also help protect your health. Moms who breastfeed have a lower chance of getting breast cancer in the future.

**Could breastfeeding be a good choice for you? Check off the reasons you’d like to breastfeed:**

- To bond and feel closer with my baby.
- To help my baby have a lower chance of getting colds, ear infections, stomach flu, and wheezing.
- To help my baby have a lower chance of being overweight or obese in the future.
- To help my baby have a lower chance of getting allergies, blood sugar problems, heart disease or cancer later in life.
- To save money. I won’t have to buy formula or bottles.
- To save time. I won’t have to wash bottles or go to the store to buy formula. Breast milk is always ready when my baby needs it.
- To help my womb get back to its normal size before it was stretched during pregnancy. (Your body releases a hormone when your baby sucks that makes your uterus get smaller.)

List your reason here: ______________________

__________________________________________

**If You Breastfeed Your Baby**

**At the Hospital**

If possible, nurse your baby for the first time within one to two hours after you give birth. Most infants are awake and do well at this time. Use a breast pump if your baby is not going to be with you for the first few hours. This will get your milk started.

Ask lots of questions. Talk with your nurse or a lactation consultant who can watch and help you be sure that everything is going well. Some women stop nursing because of pain or discomfort that almost always can be easily treated with some simple measures.

At first, you will be making only a small amount of milk called colostrum. This may not seem like enough for your baby, but the colostrum is full of calories and nutrients and is usually all your baby will need.

The hospital staff will weigh your baby and watch the number of wet and dirty diapers. This lets you know if your baby is doing well. It is normal for babies to lose some weight during the first week of life. They should catch up and be at least at their birth weight or above by age 2 weeks.

Breastfeeding works best if you are well rested. Limit visitors so you can get your sleep.
At Home

**How Often Should You Breastfeed?**

Breastfeed any time your baby seems hungry. You do not need to wait for crying. Babies often need to nurse 8 to 12 times each day for the first week or two. If your baby is very sleepy, you will need to wake them up at least every 4 hours to nurse.

To show they are ready to nurse, babies may:

- Wake up and fuss
- Move their head around to find your breast (rooting)
- Suck on their hands or smack their lips

**How Long Should You Breastfeed?**

Each mother will decide how long to breastfeed. The AAP (American Academy of Pediatrics) suggests:

- Moms who don’t have health problems should give their baby only breast milk for the baby’s first six months of life.
- Moms should try to breastfeed for the first 12 months of life because it’s good for both mother and baby.

**How to Take Care of Sore Breasts**

Some women have nipple pain for only the first minute or so of nursing. This is normal and should get better on its own within the first week.

If your breasts are still sore, try these tips:

- Make sure your baby latches on and gets enough breast tissue in his or her mouth. Also, if the baby is not making a tight seal, your nipples can get sore or cracked.
- Place cold packs or a package of frozen peas on your breasts between feedings if they feel too full of milk.
- Take mild pain medicine like acetaminophen (Tylenol®). This medicine may be covered by your plan if you get a prescription from your doctor.
- Apply some cream with lanolin in it after nursing. This can keep your nipples from drying or cracking. Only use creams or medicines your doctor tells you to use.
- Wear a supportive bra. Make sure it is not too tight.
- Try your best to relax when you are feeding so the milk will come easily. Take some deep breaths and drop your shoulders.
- Let your baby suck for as long as the sucking is strong. But if the baby starts to doze or just nibble, stop the feed. Put your finger in your baby’s mouth alongside your nipple to get your baby to let go. Don’t just pull your baby off.
- Rinse your nipples with clear water after nursing. Don’t use soap. Leave your bra off or open so your nipples can air dry for a short time.
How to Keep Your Breasts From Getting Too Full (Engorged)

Mandy’s Tip

“I put a big safety pin on my bra strap after I feed. When I go to nurse the next time, I start on the side that doesn’t have the pin. This lets me know which breast may be fuller. Also, I take a wet washcloth and gently tap my baby’s bare foot. This gets her up if she starts to doze when she is nursing. This also helps me get all the milk out before she stops nursing.”

Try these other tips:

● Feed your baby whenever he or she is hungry. This is called feeding on demand.
● Make sure your baby nurses on each breast each time he or she feeds.
● Release or express a little milk if your breast feels too full for the baby to latch on. Gently squeeze the areola—the darkish area around your nipple.
● Take a hot shower or put on a heating pad before feeding to help you release your milk.

Get Help With Breastfeeding

Here are some ways to get help with breastfeeding:

● Call your baby’s doctor.
● Call a lactation consultant.
● Call WIC. That’s short for Women, Infants and Children Program. Call your local health department and ask for the WIC office. Or ask your OB or nurse for the WIC number.

Breast-Feeding After a C-Section

“I wanted to breastfeed my baby after my C-section. My nurse helped me find a good way to hold the baby so she didn’t rest against my stitches. It worked!”

If you nurse after a C-section, you may feel sore where you had surgery. Get the help you need while in the hospital. Ask your nurse to teach you the best ways to hold and support your baby. Get some pain medicine to take at home that is safe while you are nursing. With a little practice, you will be able to start breastfeeding soon after your C-section.

If You Use Formula

If you can’t or choose not to breastfeed your baby, formula is the way to go. Most formulas are very good and can meet your baby’s nutrition needs.

At the Hospital

Your doctor and the hospital staff can help you choose a formula that is right for your baby.
Baby’s Doctor Visits

Before your baby leaves the hospital, he or she will be checked by a doctor. You should choose this doctor before your baby is born (see page 43).

Your baby will most likely visit the doctor again several days after leaving the hospital. This visit will show if feeding is going well. The doctor will also check that your baby does not have jaundice, or yellowing of the skin.

Your baby will probably see the doctor again at 2 to 4 weeks. The doctor will give you a schedule of visits for the first year.

Will You Have Your Baby Boy Circumcised?

Boys are born with a hood of skin (foreskin) that covers the head (glans) of the penis. When a baby is circumcised, this foreskin is removed—showing the end of the penis. This is done in the hospital, before you take your baby boy home.

Keep Your Baby Safe

Your baby needs you to protect him or her. Here’s how to keep your baby safe.

Follow these safety rules:

- Never place your infant in a high place unless a grownup is right there. Even newborns can move suddenly and fall off beds and changing tables. They can fall out of infant seats when they aren’t strapped in.
- Choose pets that are known to be safe around babies. If you have a pet already, always keep a close eye out when the baby and pet are together.

Give Your Baby a Safe Place to Sleep

Get your baby’s room set up even before birth. Take these steps:

- Buy or borrow a firm mattress and a crib, cradle, or bassinette that follows safety rules.
- Make sure the sheets fit tight.
- Never place your baby on sofas, waterbeds, sheepskins, or other soft surfaces. They can cause your baby to stop breathing.
- Don’t use soft bedding, pillows, or stuffed toys in your baby’s sleep area. If bumper pads are used, they should be thin, firm, and well-tied.
- Use a light blanket and tuck it in the sides of the crib.

Before deciding to have your baby boy circumcised, talk with your child’s doctor about the pros and cons.
Set the room temperature so your baby does not get too hot or too cold. An adult with light clothes on should be comfortable in the room.

Make sure your home has smoke detectors and carbon monoxide detectors. Place them on each level of the house and near bedrooms.

Keep Baby Away From Cigarette and Cigar Smoke

Smoke is very dangerous for babies (see page 14):

- Don’t smoke around your baby or their sleep area.
- Don’t allow others to smoke around your baby or their sleep area.

Using an Infant Car Seat

You can’t leave the hospital without a car seat. You can buy or rent one. Or call your local health department to see if you can get a seat at a low cost or for free.

Once you get the seat, put it in the car the right way. This is true whether the car belongs to you or to someone else.

Not sure if you’re putting it in right? Call your local health department for ways to get help.

Place Your Baby in a Safe Sleep Position

You baby will be safer if you follow these rules:

- Put your baby on his or her back to sleep for naps and at night, unless your doctor tells you not to.
- Place your baby in the “foot to feet” position in the crib. Place your baby’s feet at the foot of the crib. If you use a light blanket tuck it in around the crib mattress. The blanket shouldn’t be any higher than your baby’s chest.
- Baby can be placed on his or her tummy when awake. This is often called “tummy time.”
Going Home From the Hospital

Feeling a little nervous? Very excited? A bit overwhelmed? These are normal feelings when you bring your baby home from the hospital. You also may be feeling tired or sore, depending on your delivery. Your hormones may be leaving you feeling a bit up and down.

Your partner or other children may feel a little left out if you are placing all your attention on the baby. You may have family and friends knocking at your door, eager to see your baby.

Know that it is normal for young infants to cry for 1 to 5 hours a day. Sometimes it is hard to calm a baby down. Ask others to rock, hold, and comfort the baby to give you a little break. The good news is that crying most often goes down after the first few weeks of birth.

Remember—it is never okay to shake a baby. If you feel you are losing your temper, calmly put your baby down. Call family or friends and say you need a little break. Go for a walk, read a magazine, or watch a TV show. But—never shake your baby. Even one shake can cause brain damage or worse for life.

Try These Tips From Other Moms

Darla’s Tip—Make Time for Your Other Kids

“My toddler, Amber, was not so happy to see the new baby. My husband bought Amber her own baby doll. When I change my son, Amber changes her dolly. We both try to spend time alone with Amber so she isn’t feeling left out.”

Lee’s Tip—Ask Others to Help Feed Your Baby

“As a first-time mom, I didn’t know what to expect once we left the hospital. I’m lucky that the baby’s dad and his mom help out a lot. I pump breast milk, and one of them helps with the feedings.”

Sandra’s Tip—Nap When Your Baby Naps

“I can’t get a good night’s sleep these days. So I take naps whenever I can. It’s a good thing Bobby naps a lot too!”

Baby Blues

Many moms feel low or let down when they leave the hospital. There is not any special reason for blues to come. They tend to come and leave quickly. Do not worry too much about why it happens, and do not feel guilty.

Postpartum Depression

If you still have the blues after 2 weeks, call your doctor. You may have postpartum depression. And there is help (see page 55).
You will need to see your doctor for a follow-up visit about 4 to 6 weeks after you give birth. Write this date on your calendar to remind yourself of this most needed visit.

Your doctor will check to see how you are doing after giving birth. Be sure to get all your questions answered. And feel free to share any problems or concerns with your doctor. You will also get a blood sugar test if you had diabetes while you were pregnant. If you did not have a Pap smear during your pregnancy or if you need a repeat Pap smear, make sure your doctor does this.

### Birth Control Methods

Not wanting to get pregnant again at this time? Read this section to learn about safe forms of birth control that work. Meet with your doctor to go over types that will work best for you and your lifestyle. There have been lots of changes to birth control in the past few years. Get the straight facts here!

#### Condoms

Condoms work well to stop the spread of STDs like HIV. So if you have been with other people or you think your partner has been with other people, tell your partner to use a condom each time you have sex.

Condoms don’t work as well as some other forms of birth control to keep you from getting pregnant. **The condom should be used at the same time as another form of birth control.**

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### Birth Control Pills

“I was afraid to take birth control pills at first because of the hormones they have. My nurse explained that the amount of hormones is really very small. They are smaller than when you have your period! These hormones send a signal to your body that says you don’t need to ovulate. When you take birth control the right way, this stops you from getting pregnant.”

The pill is also called an oral contraceptive because you take it by mouth. The pill has been around a long time. Today’s pills are much safer than ones used many years ago. They work well to keep you from getting pregnant when you take them the right way.
For Best Results
Get into the habit of taking the pill every day at the same time. Take it before you brush your teeth each morning. Or take it before you go to bed each night. This will become a habit each day.

News to Know About the Pill
Here are some key facts about the pill.

Early Side Effects
During your first month on the pill:
- Your breasts might feel tender.
- You might feel sick to your stomach.
- You may spot a little bit of blood now and then.

By the time you are on your second pack, these signs should go away.

Other Side Effects
You may get a headache from the pill. Talk to your doctor about trying a new pill or a different type of birth control.

You may have lighter periods than normal while on the pill. In fact, some women say they don’t have periods at all while on the pill. Call your doctor if you have signs of being pregnant such as sore breasts or being sick to your stomach. If you think you might be pregnant, call the doctor or take a home pregnancy test.

There are some birth control pills that make it so you don’t have a period for months. Ask your doctor about this type.

Missing Pills
What should you do if you forget to take your pill?
- If you forget one pill, take two the next day.
- If you forget two pills in one month, use a condom for backup. Or don’t have any sex that month to make sure you don’t get pregnant.

If you are on antibiotics, use condoms. Sometimes these medicines make the pill work less well. Talk to your doctor to get your questions answered.

The IUD
“We weren’t ready to have a second baby for at least three years. So my husband and I talked to my doctor about all the choices. The IUD is a safe option. We picked a method we thought we’d really be able to stick to.”

The IUD is short for intrauterine device. It is a small T-shaped plastic device that your doctor slides up into your womb.
It is a very safe form of birth control. The IUD is a good choice if you don’t plan to have a child again for several years. When you are ready to be pregnant again, it is removed.

**How It Works**

The IUD works by:
- Damaging the sperm and the egg just enough so that when they meet, the sperm does not fertilize the egg
- Limiting ovulation
- Making the mucous in your cervix too thick for the egg to get through

**News to Know About the IUD**

Here are some key facts about the IUD.

Each IUD has a small string attached. This lies in your vagina. It is not in the way when you have sex. The string is there so that you and your doctor know that the IUD is safely in place.

In the past there were IUDs that caused some pelvic infections. This is no longer the case. The chance of having a pelvic problem is no higher with an IUD than with other forms of birth control.

Call your doctor right away if you have any heavy bleeding from the vagina or bad pelvic pain while the IUD is in place. Call your doctor if you run a fever or have stomach pain with these symptoms.

**Two Types of IUD**

ParaGard® is made of copper. It can be used for 10 years. At first your periods may be worse while using it.

Mirena® has hormones in it. It can be used for 10 years. Your periods may be lighter and easier. They may even go away.

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**Vaginal Ring**

“At first, this method seemed sort of odd to me. But my nurse said a lot of women like it and have not had problems using the ring. It is really easy to put in my vagina and take out myself. I put a new one in every 3 weeks.”

This flexible, plastic ring sits in your vagina. It contains a small amount of hormones, both estrogen and progesterone. The ring stays in place for 3 or 4 weeks and then is removed. You put it in and remove it yourself. Right now there is one type of ring, called NuvaRing®.

**News to Know About the Vaginal Ring**

Here are some key facts about the vaginal ring:
- Some women find their periods become very light or go away.
- NuvaRing is very good at keeping you from getting pregnant.
- You will not feel the ring when you have sex.
- NuvaRing does not cause you to gain weight.
Depo-Provera—A Contraceptive You Get by a Shot

“I am not big on shots. But then—getting one little shot just four times a year and I won’t get pregnant? I can do that. I am just not ready to have a baby so soon.”

You can get a shot of the hormone progesterone once every 3 months. This hormone tells your body not to ovulate. The most common type of injection is called Depo-Provera®.

**News to Know About Depo-Provera**

Here are some key facts about Depo-Provera:

- You may bleed a little bit on and off for the first 2 or 3 shots.
- Some women gain 5 or 6 pounds each year they use this method. Staying active and eating right can keep that weight off.
- You may not get your period for 3 to 6 months after you stop taking it.
- This is a good method to think about right after you have your baby. You are protected from getting pregnant for 3 months with just one shot.

Make sure you show up at your doctor’s office to get your shots. Doctor’s offices are very good now about getting patients in and out quickly for their Depo-Provera shot.

IMPLANON™—Birth Control Placed Under the Skin of Your Upper Arm

“I chose a birth control method that was placed just under the skin in my upper arm. It didn’t hurt and it only took a few minutes. My doctor said it is very easy to remove when it is time. Now I don’t have to worry about birth control for 3 years.”

IMPLANON is a small rod that contains medicine. Getting Implanon into your upper arm does not hurt, although you may feel a slight tugging feeling. Your doctor must be certified by the makers of Implanon to be able to give it to you.

IMPLANON works for 3 years. After 3 years, it is easily removed. If you want, you can have a new one placed in your other arm.

**News to Know About IMPLANON**

Here are some key facts about IMPLANON:

- You might have bleeding that is on again, off again for a while.
- You might stop having periods.
- You will return to your regular cycle quickly after IMPLANON is removed.
- Some women get headaches or acne.
- Some women gain weight.
Choosing a Form of Birth Control

Here are some questions to ask yourself:

How long do I want the birth control to last?
Do I want my periods to get easier?
Do I need to protect myself or my partner from STDs like HIV?
What side effects worry me?

Talk with your doctor about the best choice for you.

Remember—no form of birth control is perfect. There is always a small chance that you can get pregnant while using birth control. But using birth control makes it much more likely that you can choose when you want to become a mom again.

After you have been on a method for a while you may find it is not the one you prefer. Meet with your doctor and let him or her know what isn’t working before you stop using your birth control. That way you can work together to find a new birth control method that is right for you. And you are also protected if you have sex and are not ready to have another baby at this time.

Certain that you have finished having children?

Some women choose to get their tubes tied so they can’t ever get pregnant again. Or their partners get a vasectomy. It is a surgery to cut or tie off the two tubes that carry a man’s sperm out of the testicles. This makes the man unable to get a woman pregnant.

Last but not least, congratulations! There is someone new in this world who thinks you are really special.

Think About Baby Names

There are many books and websites devoted to baby names. Discuss ideas with family and friends. Have fun!

Write your list of names here.

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Congratulations on reading this handbook.

You have learned a lot about what you can do to have a healthy pregnancy. Good luck on your pregnancy and on bringing a new life into this world. Becoming a mother is a grand journey!
Centene’s Start Smart
For Your Baby Physician Team

Mary Mason, M.D., MBA, is Senior Vice President & Chief Medical Officer for Centene Corporation. Dr. Mason leads the Start Smart for Your Baby team for Centene. Prior to coming to Centene, Dr. Mason served as Medical Director and Associate Medical Director for two leading managed care organizations. She has practiced internal medicine since 1999.

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Plain Language Approach

This booklet was edited by a health literacy expert who wrote the guide in plain language style so that people can read this important information, and will want to read it.

Makes Learning about New Motherhood an Exciting Journey

“If you are looking for a book that provides quick tips and health information on what to expect as a new mother, the Start Smart Pregnancy Book is the one to get. The mini-testimonials, Q&A and bullet points make learning about new motherhood an exciting journey. As an organization that helps women and their families reach their healthiest potential, we are excited that expectant moms who might not otherwise receive health information now have this resource.”

— Tommi Thompson, Wisconsin Women’s Health Foundation

The Start Smart Pregnancy Book is full of important and practical information—everything from prenatal care to postpartum issues. It is a wonderful resource for pregnant women!

—George Macones, Chairman of OB/GYN at Washington University School of Medicine

The information contained in this Pregnancy Book is for informational purposes only and is in no way meant to be a substitute for professional medical advice, care, diagnosis or treatment. Always consult your physician for diagnosis and for answers to your personal questions. Neither Centene Corporation, its subsidiaries, affiliates, nor any individual involved in the development of this booklet is responsible or liable, directly or indirectly, for any form of damages whatsoever resulting from use (or misuse) of information contained or implied by the medical information provided.
Start your pregnancy off right with the

Start Smart
Pregnancy Guide

The March of Dimes knows that healthy choices can help moms have healthy pregnancies and healthy babies. The Start Smart Pregnancy Book is a great place to begin. Its friendly, easy-to-read style gives moms-to-be important information on smart things to do that can help make their pregnancy healthy. You'll get the inside story on why prenatal care is so important, how to eat healthy foods and how to stay away from the unhealthy stuff, what labor and childbirth is like, and exactly what's going inside your belly for 9 months while your baby grows.

“The book is a smart way to get a smart start on your pregnancy.”

— Janis Biermann, MS, Senior Vice President, Education & Health Promotion, March of Dimes

The March of Dimes helps moms and families have full-term pregnancies and healthy babies. Whether you're pregnant, thinking about getting pregnant or just had your baby, you're bound to have questions.

Here's how we can help:

Go to: marchofdimes.com/pnhec/pnhec.asp or nacersano.org

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